

# CLAIMS ONLY

SERIAL NO.

FILING DATE

APPLICANT(S)

## CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1					
2		1				
3		7				
4		2				
5		2				
6		①				
7		①				
8	1					
9		1				
10		2				
11		2				
12		2				
13		2				
14		1				
15	1					
16		1				
17		1				
18		1				
19		2				
20		2				
21		1				
22		1				
23		1				
24		1				
25		4				
26		4				
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50						
TOTAL IND.	3	↓		↓		↓
TOTAL DEP.	41	←		←		←
TOTAL CLAIMS	44					

	*		*		*	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
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99						
100						
TOTAL IND.		↓		↓		↓
TOTAL DEP.		←		←		←
TOTAL CLAIMS						

\* MAY BE USED FOR ADDITIONAL CLAIMS OR ADMENDMENTS